

EIGHTH ANNUAL REPORT

OF THE

M A N A G E R S

OF THE

STATE LUNATIC ASYLUM,

OF THE

State of New-York.

~~~~~  
Made to the Legislature February 27, 1851.  
~~~~~

ALBANY:

CHARLES VAN BENTHUYSEN, PRINTER TO THE LEGISLATURE,
407 Broadway.

.....

1851.




EIGHTH ANNUAL REPORT

OF THE

M A N A G E R S

OF THE

STATE - LUNATIC ASYLUM.



~~~~~  
Made to the Legislature February 27, 1851.  
~~~~~

ALBANY:

CHARLES VAN BENTHUYSEN, PRINTER TO THE LEGISLATURE,

407 Broadway.

.....

1851.



State of New-York.

No. 42.

IN SENATE, FEB. 27, 1851.

EIGHTH ANNUAL REPORT

Of the Managers of the State Lunatic Asylum.

Utica, February 25, 1851.

To the Honorable SANDFORD E. CHURCH,

President of the Senate :

SIR—Herewith is submitted the Annual Report of the Managers of the State Lunatic Asylum.

Respectfully yours,

A. MUNSON,
. B. WELLES,
SILAS D. CHILDS,
S. NEWTON DEXTER,
CHAS. A. MANN,
N. DEVEREUX,
T. ROMEYN BECK,
JOEL A. WING.



Digitized by the Internet Archive
in 2018 with funding from
Wellcome Library

<https://archive.org/details/b30317484>

OFFICERS OF THE ASYLUM.

MANAGERS.

ALFRED J. MUNSON, UTICA.
WM. B. WELLES, "
SILAS D. CHILDS, "
CHAS. A. MANN, "
N. DEVEREUX, "
S. NEWTON DEXTER, WHITESBORO.
T. ROMEYN BECK, ALBANY;
JOEL A. WING, "
JAMES S. WADSWORTH, GENESEO.

RESIDENT OFFICERS.

N. D. BENEDICT, M.D., Superintendent and Physician.
GEORGE COOK, M.D.,
MORTIMER G. PORTER, } Assistant Physicians.
J. P. GRAY,
MORTIMER RHOADES, Steward.
ANN W. SMITH, Matron.

EDMUND A. WETMORE, Treasurer, UTICA.

1

THE HISTORY OF THE

REIGN OF

CHARLES

THE FIRST

OF GREAT

BRITAIN

BY

JOHN RUSSELL

ESQ.

OF THE

BAR

AT

THE

TEMPLE

IN

THE

CITY

OF

LONDON

PRINTED

BY

JOHN

WATTS

AT

THE

TEMPLE

IN

THE

EIGHTH ANNUAL REPORT

Of the Managers of the State Lunatic Asylum for the
year ending Nov. 30, 1850.

TO THE LEGISLATURE :

Pursuant to the requirements of the act organizing the asylum,
the undersigned respectfully submit the following

REPORT.

The benefits conferred the past year by this Institution on the unfortunate class, for whose care and treatment it was established, have not been less than in any previous year of its existence.

Our present superintendent, who was appointed to take the place of the lamented Doct. Brigham, entered upon the discharge of his duties on the eighth of December, 1849, and from that time he has devoted his best energies, and with very satisfactory success, to the management and treatment of the patients committed to his charge.

His annual report made to us, and which is herewith submitted to the Legislature, gives a full and detailed account of the operations and results of this Institution during the year it has been under his charge.

From this it will be seen that the whole number of patients under treatment during the year, was 816 ; of whom 171 were discharged recovered, 8 much improved, 49 improved, 108 unimproved, and 51 died ; leaving 429 remaining in the asylum at the end of the year.

The whole number of admissions from the 16th of January, 1843, when the asylum was first opened for the reception of patients, to

the 30th of November, 1850, is 2743, of whom 1188 have been discharged recovered, 468 improved, 328 unimproved, and 320 died.

The treasurer's annual report, also herewith presented, and containing a condensed statement under appropriate heads, of receipts and expenditures on account of the institution for the last year, shows its financial condition to be unembarrassed.

A considerable part of the balance of cash in the treasury at the date of the report, 1st December, 1850, was required to pay bills for the current expenses of the quarter ending on the 30th of November, and which had not been presented and actually paid at the date of the treasurer's report.

We have regarded the proper management of the finances and the regulation of the current expenditures of a State institution of this character, as essential to its success and continued usefulness. The law organizing the asylum, wisely requires all purchases to be made for cash, and not on credit, and there has never been a time since patients were received into the asylum, that the treasury has not possessed sufficient funds to pay all necessary current expenses. At the commencement we established by the bye-laws adopted for the government and management of the Institution, a system for the disbursement of moneys, which requires all bills or accounts before they are paid, to pass under the inspection of the superintendent, and to be countersigned by him, and then presented to the treasurer for payment, on the order of the steward. Experience has shown the system adopted to be practically beneficial, and to insure fidelity in the disbursement of the funds.

We have at all times endeavored to impress on those charged with the immediate disbursement of the expenditures of the Institution the importance and necessity of exercising the same care and prudence that a judicious and prudent individual would use in the management of his own concerns, and not to regard the moneys placed under their control *as the property of the State* or the public, but as a trust fund to be sacredly devoted to the relief and benefit of those who are suffering under the most deplorable of all calamities—the deprivation of their reason.

The Institution is greatly indebted to the care, fidelity and business capacity of our Treasurer, (who has held his office from the time the Asylum was first opened for the admission of patients) for the proper management of its funds.

The appropriation of \$1,500, made by the Legislature on the 16th of April, 1850, for the purchase of the library left by the late Doct. Brigham in the Asylum at the time of his decease, has been drawn from the State Treasury and expended for this purpose. The library thus purchased contained most of the European and American works relating to the subject of insanity, as well as many medical works, and is a valuable acquisition to such an institution. It was purchased at the appraisal of Dr. T. R. Beck.

The sum of \$2,500 appropriated at the same time by the Legislature for the purchase of furniture during the last year, has also been expended for that purpose, with much advantage and benefit to the patients. It aided in part to supply deficiencies in furniture much needed in some parts of the house. A like sum also appropriated at the same time and for the same purpose for the current year can be beneficially and usefully expended, and still some parts of the house will remain with hardly sufficient furniture for the proper accommodation of its inmates.

The law of last session restricting the power of county judges to send indigent persons, not paupers, to the Asylum to be supported at the expense of the county, to recent cases—that is, to cases where the person has become insane within one year next prior to the granting of a certificate by the county judge, has been effectual to obviate the complaints that were formerly made by some county officers of the indiscreet exercise of the power by county judges. During the year, one hundred and sixteen patients were sent by county judges, and most, if not all of them, were very fit cases for treatment in an asylum for the insane, and were deserving of the public aid and bounty.

It will be seen by reference to the treasurer's report, that the expenditure for alterations and repairs was larger than during previous years. This was occasioned in part by the alteration of old and the

construction of some new drains, which were much needed to effect a more perfect drainage.

All of which is respectfully submitted.

A. MUNSON,
W. B. WELLES,
SILAS D. CHILDS,
S. NEWTON DEXTER,
CHAS. A. MANN,
N. DEVEREUX,
T. ROMEYN BECK,
JOEL A. WING.

TREASURER'S REPORT.

To the Managers of the New-York State Lunatic Asylum :

The Treasurer of the Asylum respectfully submits the following summary of his receipts and payments, for the year ending November 30, 1850.

RECEIPTS.

1849.

Dec. 1.	Balance in the treasury,	\$10,494 38
	From counties and towns for support of patients,	36,607 52
	“ sundry private patients,	23,520 35
	“ the State Treasurer, for salaries of officers,	4,462 48
	“ the State Treasurer, for appropriation of 1850, for furniture,	2,500 00
	“ the State Treasurer, for support of insane convicts,	2,310 37
Dec. 6.	“ the steward, for sundry articles sold by him,	27 31

1850.

March	“ the steward, for sundry articles sold by him,	9 06
April 16.	“ James Beebe & Co., for old boilers, ..	111 06
May 13.	“ the steward, certain expenses,	4 12
June 24.	“ do for sundries sold,	19 56
Sep. 27, Nov. 7,	do do do	55 33
Sept. 30.	From do for journal of insanity, ...	80 42
Nov. 6.	“ do cash, for petty expenses, returned,	45 50

\$80,247 46

PAYMENTS.

For provisions and household stores,	\$22,687 99
“ furniture,	6,132 78
“ attendants, assistants and labor,	10,644 51
“ fuel and lights,	5,826 89
“ miscellaneous expenses,	371 36
“ farm, grounds, garden and barn,	1,271 15
“ books, stationery, printing and binding,	499 18
“ petty expenses advanced to the steward,	1,100 00
“ salaries of officers,	4,637 74
“ medicines and medical supplies,	1,756 65
“ alterations and repairs,	4,039 19
“ advances for clothing of patients,	5,363 79
“ patients miscellaneous account,	383 13
“ refunding to sundry patients, on leaving the Asylum,	313 89
1850. Dec. 1. Balance in the treasury,	15,219 21
	<hr/>
	\$80,247 46
	<hr/>

EDMUND A. WETMORE, *Treasurer.*

UTICA, Dec. 7, 1850.

EIGHTH ANNUAL REPORT

Of the Superintendent of the New-York State Lunatic Asylum, for the year ending November 30, 1850.

TO THE MANAGERS OF THE ASYLUM:

Gentlemen,—In conducting the affairs of this institution during the past year, it has been my aim to maintain the high character it had already attained under my predecessor, and to add, if possible, to its reputation. I have sought to make it a comfortable and cheerful home for those who have enjoyed its privileges. How far my efforts have succeeded, you are able, from your visits and inspection, to determine.

In entering upon the duties of the office to which you so flatteringly invited me, I was profoundly impressed with its vast and weighty responsibilities; nor have they been found less than anticipated. To meet them, I have received from your board, counsel and direction. To you I still look with confidence for the future, and promise fidelity to the trust you have placed in me.

	Total.	Males.	Females.
At the commencement of the year, the number of patients in the house was..	449	226	223
Admitted during the year,	367	185	182
	<hr/>	<hr/>	<hr/>
Total number during the year,	816	411	405
	<hr/>	<hr/>	<hr/>

Of this number there has been discharged:

	Total.	Males.	Females.
Recovered,	171	94	77
Much improved,	8	4	4
Improved,	49	26	23
Unimproved,	108	51	57
Died,	51	34	17
	<hr/>	<hr/>	<hr/>
Total discharged,	387	209	178
	<hr/>	<hr/>	<hr/>

There were remaining in the asylum at the close of the year, November 30th, 1850:

Males,.....	202
Females,.....	227
Total,.....	<u>429</u>

Eight hundred and sixteen patients have been treated during the past year. This large number of cases has come before us as new patients, to be examined, studied and treated. Four hundred and forty-nine, it is true, were here at the end of last year, and many of them had been here for years; still, when my duties commenced, we were unacquainted. For this and for many other reasons, the labors of the past year have been great, and if they have not been in all respects satisfactory to our friends, we can add they have not been to us, and we see wherein we can improve, and trust we shall have the ability as well as the will to do so.

Of the three hundred and sixty-seven cases admitted, nine were twice admitted during the year, reducing the number to three hundred and fifty-eight persons, who came to us strangers.

We have a good hope that a large proportion of the one hundred and seventy-one discharged as cured, were completely restored. Many of them remained for a number of weeks after they were apparently well. A few left prematurely, of whom three returned before the end of the year. One of these three was admitted for the second, one for the third, and one for the fourth time. The duration of insanity in the one hundred and seventy-nine cases, discharged as cured, was as follows:

Less than one year,.....	124
One year,.....	21
Two years,.....	9
Three years,.....	7
Four years,.....	2
Five years,.....	2
Six years,.....	1
Unascertained,.....	5
	<u>171</u>

It will be observed that in a large proportion of those discharged well, the duration of insanity had not exceeded one year. Though the importance of early treatment is generally understood and regarded, yet we are constantly receiving patients whose treatment has been too long postponed. In many cases insanity comes on so gradually that the friends of the person scarcely perceive it until the disease is fully established. It is in this insidious class especially that friends need to be cautioned against neglecting advantages afforded by hospitals until too late to become effectual. A few cases, it is true, recover who have been long insane, but they are rare. The one reported above of six years duration is quite remarkable. It was that of a man who had been for years a resident here and had been long looked upon as entirely demented. He would stand for hours in strange postures apparently without thought or feeling. Gradually he began to take notice of things about him, to exercise, resumed his trade that of a tailor, and at length acquired his former dexterity and skill. He continued working at his trade with judgment and profit until we were satisfied of his recovery and discharged him.

The eight cases discharged much *improved* were in the immediate prospect of being restored to reason, and of whose ultimate restoration we did not doubt. These may now all be well. Some of them are known to be so. But it would have been much safer and more satisfactory to have seen them entirely well before they were taken from us. The law humanely provides, "That no patient shall be deprived of a trial of at least six months, except in special cases;" but unfortunately very many require a much longer time for their recovery. It is however, matter of congratulation that in so few cases the treatment has been interrupted while in immediate prospect of recovery. The small number of patients so removed is indicative of a sound public sentiment, which we hope will yearly become more enlightened.

Of the forty-nine cases discharged *improved* and the one hundred and sixteen discharged *unimproved*, a part were removed under the law passed April 10th, 1850, in relation to the indigent class whose time had expired. The remainder, and much the larger number, were of those whose residence here had been protracted and who had

become demented and helpless, and were removed by the superintendents of the poor. While it cannot be doubted that some suffered by the change, yet we must believe that the cause of humanity is served by extending the advantages of the institution to those who will be likely to be cured thereby. Were all who are admitted retained for life, if not cured, the house would speedily be filled with incurables.

The causes of death in the fifty-one cases who died during the year were,

Chronic mania,	12
Acute mania,	3
Dysentery,	13
General paralysis,	3
Operation for strangulated hernia,	1
Pleuritis,	2
Acute gastritis,	1
Typhus fever,	1
Acute dementia,	1
Erysipelas,	4
Phthisis pulmonalis,	2
Diarrhœa,	2
Aneurism of aorta,	1
Phagedena,	1
Ascites,	1
Metro-peritonitis,	1
Strangulation,	1
Suicide,	1
	—
Total,	51
	==

It will be seen by the above table that twelve died of chronic insanity, the powers of life gradually failing under the weight of mental suffering. These cases presented no evidence of organic disease ; no inflammation or results of inflammation in any tissue or organ. For months before their dissolution, the capillary circulation became extremely feeble, the secretions imperfect, the elaboration and appropriation of food defective, and consequent emaciation ensued. The whole train of morbid phenomena being referable to

insanity, it seems proper to report them as dying of mania rather than of "marasmus." These twelve deaths were all old cases, whose last hope of restoration had long since departed, whose existence for years had been at best but a living death, a protracted dying, and for a continuation of which their most devoted friends could have no longings.

Three died of acute mania, a very small mortality in proportion to the number admitted with this form of disease. No class of patients give us more anxiety, and no deaths, except by suicide, are more painful. These three cases were males, one of whom arrived after a fatiguing and exciting journey by railroad, in a state of intense excitement, which had existed for a few days, during which the patient had taken but little food or sleep, his physical powers far exhausted, and in spite of every effort to subdue it, the raving and delirium continued with increased intensity, while the bodily strength failed until death closed the scene on the seventh day after admission, the body crushed and prostrated by the ungovernable power of its own machinery. The second was a case of less intensity of excitement, and more protracted. The third was a case of paroxysmal insanity, long a resident in the institution, whose attacks were gradually becoming more and more intense. These cases might be said to die from exhaustion, but we think acute mania better expresses the cause of death.

Thirteen died of dysentery ; a larger number than from any other disease, though it was at no time epidemic in the institution. We include under the head of dysentery, a form of disease very unlike dysentery of private practice and of general hospitals, but which we believe is common in asylums, and which we do not recollect to have seen called by any other name. It occurs in chronic cases whose powers of life have been long gradually sinking, and in recent cases who have become much exhausted by protracted excitement. Without premonitory symptoms or exposure to known exciting causes, the patient is suddenly seized, and generally in the night, with bloody discharges, scanty and gelatinous, or more frequently copious and serous, with no heat of skin or abdomen, nor pain or thirst, or loss of appetite or strength. Death supervenes a few days after the attack. We have witnessed but little benefit from remedies in this form of

disease, the treatment for ordinary dysentery proving entirely nugatory.

Four patients died of erysipelas. Three of these cases were phlegmonous. We had twenty-three cases of this disease in the course of the year, prevailing during the cold months when the windows and doors were necessarily closed, and the atmosphere consequently impure. This perhaps more than any other disease is intimately connected with imperfect ventilation. It is said of one of the New-England hospitals, before infested with erysipelas, that after the introduction of a system of forced ventilation, (and no other deserves the name,) this formidable disease entirely disappeared.

The case of aneurism of the aorta occurred in a patient with hemiplegia of the left side, who died instantaneously from the rupture of an enormous aneurism, which by its size and pressure had produced extensive absorption of the vertebræ and sternum, the blood escaping into the cavity of the thorax.

One patient died of acute peritonitis, following the operation for strangulated hernia, on the thirteenth day after the operation.

One female died on the thirteenth day after parturition. She was delivered a few weeks after her admission for acute mania, which continued unsubdued until her death.

We are pained to have to record one death by suicide; an interesting lady who by loss of health became insane. Many times before her admission she had attempted her life and was brought to the institution with poison in her stomach taken half an hour before. Being a woman of great determination, her mind was intensely fixed on this one object, until she succeeded in accomplishing it by suspension from the window bars of her chamber, to which she had retired at mid-day under circumstances well calculated to elude suspicion.

Three patients died of general paralysis, two of whom became paralytic in the institution, the other was admitted during the year. Two died after being confined to bed for months, the powers of life gradually failing. The third, after an attack of articular rheumatism, died suddenly of asthma.

For the sick generally, for the bed-ridden, and especially for paralytics, who are unable to make their wants known, and who require the same kind of attention, and indeed more than infants, we need the conveniences and appliances of an infirmary, to which they could be removed away from the business and bustle of the halls, and where their friends could also be accommodated and permitted to give those attentions to their expiring relatives which a wife or mother alone can render. The hospital rooms now used are unsuited for the purpose. An infirmary, always desirable, would be especially needed on the breaking out of an epidemic or contagious disease.

There occurred during the year two cases of intermittent, three of remittent, and six of mild continued fever; all of which recovered. Two cases of typhus fever were admitted during the stage of delirium. One was brought from a distant part of the State, and died the day after his reception; the other recovered. The cases of continued fever were in August and September. A number of attendants were also attacked by the same form of fever, two of whom died. Though these cases were confined to one portion of the building we were unable to discover their origin with certainty, but for many reasons were induced to attribute them to imperfect sewerage, all with a single exception, occurring in the neighborhood of an imperfectly constructed drain.

The tendency in hospitals of this kind is to become filled with incurables. Of the four hundred and forty-nine remaining November 30th, 1849,^{ee} a large proportion were considered incurable. Most of these were chronic mania and dementia, whose prospects of recovery were becoming yearly more improbable.

The form of derangement in eight hundred and sixteen cases, in the house, during the year ending November 30th, 1850, was as follows:

	Remaining Nov. 30, 1849.	Admitted during year.	Total.
Acute mania,.....	38	116	154
Chronic mania,.....	163	92	255
Monomania,	47	34	81
Paroxysmal mania,.....	31	28	59
Melancholia,.....	28	49	77

	Remaining Nov. 30, 1849.	Admitted during year.	Total.
Acute dementia,.....	5	8	13
Chronic dementia,.....	105	12	117
General paralysis,.....	1	2	3
Intemperance,.....	4	3	7
Mania-a-potu,		2	2
Moral insanity,.....	7	2	9
Epilepsy,.....	15	7	22
Senile dementia,	1		1
Idiocy,.....	4	2	6
Typho-mania,.....		2	2
Feigned insanity,		8	8
Grand total,.....	<u>449</u>	<u>367</u>	<u>816</u>

The duration of insanity in these eight hundred and sixteen cases, was as follows :

	Remaining Nov. 30, 1849.	Admitted during year.	Total.
Less than one year,.....	116	262	378
One year,.....	49	38	87
Two years,.....	40	19	59
Three years,.....	51	5	56
Four years,	36	4	40
Five years,.....	29	6	35
Six years,.....	19	7	26
Seven years,.....	20	2	22
Eight years,.....	10	3	13
Nine years,.....	13		13
Ten years,.....	9	1	10
Eleven years,.....	6	1	7
Twelve years,.....	7	2	9
Thirteen years,.....	5		5
Fourteen years,.....	2	2	4
Fifteen years,.....	1		1
Sixteen years,.....	3	1	4
Seventeen years,	3	1	4
Eighteen years,.....	3		3
Nineteen years,.....	2		2

	Remaining Nov. 30, 1849.	Admitted during year.	Total.
Twenty years,.....	1	4	5
Twenty-one years,.....	2		2
Twenty-two years,.....	6		6
Twenty-three years,.....	1		1
Twenty-four years,.....	1		1
Twenty-five years,.....	2	1	3
Twenty-six years,.....		1	1
Twenty-eight years,.....	1		1
Twenty-nine years,.....	1		1
Thirty-one years,.....		1	1
Thirty-three years,.....	1		1
Thirty-eight years,.....	1		1
Forty-two years,.....	1		1
Sixty-five years,.....		1	1
Unknown,.....	7	5	12
Grand total,.....	<u>449</u>	<u>367</u>	<u>816</u>

The duration of insanity in many of these cases, both the old and the new, it will be perceived preclude all hope of recovery, and the light of reason in some is almost entirely blotted out. It requires no ordinary care and diligence to make this class of patients decent and comfortable, or even to prevent their rapidly sinking into a state of degradation the most disgusting and loathsome. If left to their instincts, these poor creatures stand about their halls as motionless as statues, or crouch in corners, sitting on their limbs until unable to use them, or roll themselves up in their garments like bundles of old clothes, destroying their own and others' comforts by uncleanly habits, and when secluded becoming absolutely bestial. In behalf of this class, our efforts are strongly directed. It is scarcely less gratifying to see them comfortable, orderly, industrious and useful, than to witness the restoration of the curable.

That all of this class can be taught to observe the proprieties of life, so as always to be quiet and manageable, we cannot hope; but the vast improvement that may be wrought in those who appear to have become irreclaimable, is worth the effort it may cost to accomplish it, and we cannot consider our duty performed, or the object of

the institution fully answered until this result is measurably attained, In addition to much moral management, they, as well as acute cases, require careful hygienic and medical treatment. With a low degree of vitality, they are easily affected by external causes ; by cold, heat, sudden changes, irregularities in diet, inadequate clothing, and especially by badly ventilated apartments. They require much attention to preserve the activity of their functions, particularly a healthy condition of the bowels and skin, Many are benefited by the occasional or continued use of laxatives and tonics, a few by anodynes, and the paroxysmal cases by sedatives. As laxatives we use aloes, especially the combination known as the "dinner pill," the confection and fluid extract of senna, magnesia and saline laxatives. As tonics, we prefer the different preparations of iron, the sesquioxide, proto-carbonate and iron reduced by hydrogen. We also use sulphate of quinine and extracts of gentian, valerian, conium, hyoscyamus and belladonna.

Of acute mania, it will be observed, we had thirty-eight cases at the commencement of the year, and have admitted one hundred and sixteen during the year. From this class occur most recoveries, though they require great care and often give us much anxiety. Many come to us in a perfect fury of excitement, raving, struggling, and resisting, exhausted by the journey, and having taken no food or sleep for days. It cannot therefore be surprising that a few of this class, their bodily powers being prostrated, sink into a state of collapse, and die, in spite of every effort to save them. Our practice in such cases is to confine the patient to his room and to his bed at night and for a part of the day ; hot baths with cold applied to the head, prolonged from thirty to sixty minutes, and frequently repeated at intervals of from six to twelve hours free evacuation of the bowels if the patient's strength will permit of it, by the administration of compound powder of jalap, compound cathartic pills, seidlitz powders, or citrate of magnesia. The latter is a favorite medicine from its easy administration, by reason of its pleasant taste, a very important consideration in these cases, which are often so violent that no amount of force can safely control them ; the forcible administration of medicine not only aggravating their excitement, but often resulting in injury to their lips, gums or teeth. The citrate is also very certain in its effects, producing speedy and copious evacuations. In no

cases have we found local or general bleedings admissible, but on the contrary nutritious diet and brandy punch are generally demanded. We give from half a pint to twelve ounces of brandy a day, and continue it for weeks as we do in mania-a-potu, the two diseases resembling each other in many of their symptoms, and post mortem appearances, and admitting of if not demanding, similar treatment.

We employ tincture of opium in doses, from half a drachm to four drachms frequently repeated, more frequently than other narcotics; alone or in combination with ipecacuanha or antimony. This combination we often prescribe, and we think with advantage, in paroxysmal mania. Many of these cases are permanent residents, the intervals of their attacks varying from one day to two years, and during the intermission some are partially and others entirely sane. We have one case in which the paroxysm occurs on alternate days like a regular tertian intermittent and in which case the insanity was produced by intermittent fever. Another who has long been a resident of the asylum has a paroxysm lasting six months every second year. Between these extremes we have numerous cases presenting great diversity in the length of the intervals. We treat these as acute mania, during the paroxysm, some of them requiring as much care as the recently admitted cases with that form of disorder. Of this class we lost two during the year, one gradually wearing out, taking but little food or sleep and continually raving and struggling and finally sinking exhausted. The other, a stout plethoric person, after raving several days and nights, during the warm weather, suddenly died comatose, as if from congestion of the brain, of which however, no evidence appeared upon examination after death.

The case of senile dementia is ninety-four years of age and has been in the house one year and a half.

Under the head of idiots we have classed six persons, two of whom are weak minded, the imbecility commencing in early life, who have so little intellect as to bring them within this class and still sufficient to warrant their admission with a hope of improvement. These cases could all be treated to greater advantage in an institution devoted exclusively to their accommodation, and we trust the day is not far distant when the State will have a school for the large number of idiots within its bounds.

Of epileptics we have had under our care during the year, twenty-two, none of whom have recovered, nor have we witnessed any decided advantage from any mode of treatment.

The seven cases of intemperance were habitually excessive drinkers, a part dangerous when intoxicated and a part placed here by their friends with a hope of reformation ; a hope which often proves fallacious.

But two cases of mania-a-potu came under our care during the year. Entirely satisfied by previous experience with the brandy treatment in this disease, we adopted it with confidence.

Two cases of delirium from typhus fever were brought to us by mistake, who were unable to return home and were therefore admitted. Our former experience in the treatment of this disease, which has not been limited, induced us to rely much on brandy, giving in addition the ordinary remedies.

Of moral or perhaps more correctly immoral insanity, nine cases have been under our care, two of whom have been admitted within the last year. These case present the various forms of derangement, from the mere rascally little sinner (two were lads) up to the most aggravated form of the genuine disease. We have an idea that a remedy not much known to modern science, but in vogue in the days of Solomon, commenced early and faithfully persevered with would have been eminently successful in preventing the development of the disease or at least arrested its progress before its full establishment. One of our patients is the exact counterpart, if not the identical fellow, seen by Mr. George Combe, in the Dublin Lunatic Asylum, who exhibits a total want of moral feeling and principle, yet possesses intelligence, ingenuity and plausibility. He has been a scourge to his family from childhood, was sent to the army to get rid of him, from which he was turned out as an incorrigible villain, always fighting and getting drunk, for which he was repeatedly flogged. By seclusion he became so savage as to render the task of entering his room and supplying his wants by no means enviable, and when at large he often assaults those around him. His chief enjoyments are eating and fighting, and although he is constantly endeavoring to "get out of these barracks," he seems to have no particular object in view but

the more free indulgence of these propensities. In all but this one case moral treatment alone has accomplished our object but on him little moral influence can be exerted. By the aid of nauseating remedies, as ipecacuanha and antimony, and purgatives, compound powder of jalap, senna and salts, &c, frequently administered, we are enabled in some degree to control him. Blisters and setons to the back of his neck are now being tried. Under this head we include one case of pyromania, an inoffensive, intelligent young man who was arrested for firing buildings and acquitted on the plea of insanity.

The eight cases of feigned insanity were all prisoners. The form of insanity assumed, varies. By one person vacuity was simulated, he being mute and motionless. Another presented the phenomena of epilepsy and hydrophobia combined to a most terrific degree, which disappeared soon after admission, but returned with increased violence after removal to prison.

Statistics of the Asylum from its opening, January 16, 1843, to December 1, 1850 :

Total number of patients admitted,	2,743
discharged,	2,314
recovered,	1,188
improved,	468
unimproved,	338
died,	320

Of the eight hundred and sixteen patients in the asylum during the past year, one hundred and one were here on a second admission, forty-five of whom when first discharged, were supposed to be well. Eighteen were admitted for the third time; ten of these were relapses. Four had been admitted four times, in three of whom the disease had returned. Two were on a fifth admission, who, when previously discharged, were well. One had been eight times admitted, and as often discharged cured, making sixty-one cases of relapses out of eight hundred and sixteen, showing the danger to be great, and loudly warning those once affected to guard against the cause renewing the disease.

Monthly admissions for eight years.

	Males.	Females.	Total.	
December,	102	94	196	
January,	105	91	196	In winter, 582.
February,	112	78	190	
March,	117	86	203	
April,	105	110	215	In Spring, 693.
May,	149	126	275	
June,	118	128	246	
July,	134	143	277	In Summer, 735.
August,	104	108	212	
September,	99	121	220	
October,	129	129	258	In Autumn, 733.
November,	120	135	255	

During the past year there were admitted:

In winter,	94
In spring,	88
In summer,	104
In autumn,	81
Total,	<u>367</u>

The months in which these persons were supposed to have become insane were :

January,	187
February,	167
March,	229
April,	199
May,	248
June,	242
July,	219
August,	204
September,	212
October,	259
November,	206
December,	166
Unknown,	205
Total,	<u>2,743</u>

We continue this table without attaching to it any great value. The vague recollection of friends as to the date of attack in numberless instances, renders it impossible to even approximate to accuracy.

The number of patients from each county for eight years, and how supported.

	By counties or towns.	By friends.
Albany,	116	44
Allegany,	9	5
Broome,	27	6
Cattaraugus,	9	7
Cayuga,	44	29
Chautauque,	44	12
Chemung,	13	7
Chenango,	55	32
Clinton,	8	4
Columbia,	21	15
Cortland,	12	15
Delaware,	15	6
Dutchess,	17	16
Erie,	25	30
Essex,	6	2
Franklin,	6	1
Fulton,	14	7
Genesee,	13	13
Greene,	31	10
Hamilton,	1	
Herkimer,	44	35
Jefferson,	59	35
Kings,	1	3
Lewis,	15	6
Livingston,	33	14
Madison,	49	53
Monroe,	66	45
Montgomery,	28	20
New-York,	6	17
Niagara,	26	8
Oneida,	154	133
Onondaga,	65	48

	By counties or towns.	By friends.
Ontario,	30	21
Orange,	36	9
Orleans,	13	6
Oswego,	37	18
Otsego,	33	48
Putnam,	3	1
Queens,	4	3
Rensselaer,	69	36
Richmond,	3	
St. Lawrence,	25	21
Saratoga,	23	29
Schenectady,	32	19
Schoharie,	23	2
Seneca,	12	15
Steuben,	32	13
Suffolk,	11	3
Sullivan,	8	
Tioga,	23	9
Tompkins,	21	17
Ulster,	23	6
Warren,	12	5
Washington,	21	16
Wayne,	21	19
Westchester,	2	2
Wyoming,	19	10
Yates,	10	13
State prisons,	44	
Out of the State,		102
	<hr/>	<hr/>
	1622	1121
	<hr/>	<hr/>
Grand total,		2743
		<hr/>

It may be observed from this table, that the counties nearest the asylum send the largest number of cases in proportion to their population. This may depend partly on distance, from the difficulty of conveying patients a long journey, and in some measure on an unwillingness of friends to be so widely separated from objects of solicitude ; but mainly, we think, on the ignorance of those so located as

to be out of the reach of information as to the character and results of the institution.

“The idea of a hospital, its purposes and its management, are familiar to those who live in its vicinity. They know its means, its objects and its administration. They know the character of its officers, and attendants. They are frequently witnessing its operations and results in the many who are going to and returning from it in improved and restored mental health. Whenever they think of the possibility of becoming insane, the idea of the hospital presents itself to their minds in the same connection, almost as readily, as the idea of their own chambers, their own physicians, and the tender nursing of their own family, is associated with the thought of their having a fever or dysentery, and when any one of their own family or friends becomes insane, the hospital occurs to them as a means of relief, and they look upon it as a resting place from their troubles.” Edward Jarvis, M. D., on the influence of distance from hospitals.

Proximity alone may not impart this knowledge. Remote towns of this and adjoining counties may be as ignorant on this subject as the remote towns of the State. Off the great thoroughfares and frequented routes, this knowledge is doubtless wanting, near as well as remote. Less influence may now be attributable to distance, as the facilities of travel almost annihilate space. Still the fact remains the same, and in view of it, it becomes us to use all diligence to make known the character of the institution at home and abroad.

The ages at which insanity commenced in the cases hitherto admitted, are as follows :

Under 15 years,	9
From 15 to 20,	300
20 to 25,	498
25 to 30,	455
30 to 35,	352
35 to 40,	354
40 to 45,	2
45 to 50,	179
50 to 55,	115
55 to 60,	98

From 60 to 65,	67
65 to 70,	34
70 to 75,	7
Over 80,	3
Total,	<u>2743</u>

Forty-four persons whose insanity commenced under twenty years of age were admitted during the past year, a large proportion of the whole number of admissions. In nine of these insanity commenced under fifteen years of age.

Sixty-two were under twenty-five years of age. We have therefore had during the year, and now have, a large ratio of young persons. This feature in our family has led us to think much of the establishment of schools for systematic instruction of a higher order than are generally needed for the insane. The occupying of patients an hour or more during the day in the rudiments of education by better qualified attendants and convalescent patients has been continued as heretofore during a part of the past year. This exercise is very useful to many, even the old and particularly the demented. There is however a class of young persons in the institution, some of whom owe their want of control of themselves to defective or improper education and training, who have too large a stock of useless knowledge to be interested in our common schools but who could be subjected with propriety to the discipline of a well regulated boarding school, under the influence of teachers of superior moral and intellectual qualifications.

Occupation of 2,743 patients admitted previous to December 30, 1850.

Farmers,	581
Laborers,	179
Merchants,	71
Tanners and Curriers,	5
Painters,	5
Seamen,	5
Broker,	1
Bookseller,	1
Bookbinder,	1

Scholars,	65
Joiners,	47
Clerks,	42
Shoemakers,	36
Blacksmiths,	30
Physicians,	20
Lawyers,	24
Teachers,	19
Saddlers,	18
Clergymen,	16
Coopers,	15
Manufacturers,	14
Cabinet makers,	13
Innkeepers,	12
Coach makers,	11
Tobacconists,	11
Boatmen,	10
Tailors,	8
Printers,	8
Pedlars,	8
Masons,	7
Stage proprietors,	7
Stone cutters,	6
Medical students,	5
Tinners,	5
Weavers,	5
Clothiers,	5
School boys,	4
Butchers,	4
Portrait painters,	4
Engravers,	4
Millers,	4
Millwrights,	4
Grocers,	4
Surveyors,	3
Speculators,	3
Gardeners,	3
Dentists,	3
Barbers,	3

Miners,	2
Moulders,	2
Hatters,	2
Confectioners,	2
Farriers,	2
Daguerrians,	2
Steamboat agents,	2
Machinists,	2
Editor,	1
Engraver,	1
Banker,	1
Druggist,	1
Military officer,	1
Baker,	1
Cotton picker,	1
Bloomers,	1
Lock smith,	1
Gun smith,	1
Railroad agent,	1
Type founder,	1
Watch maker,	1
Glass cutter,	1
Brewer,	1
Pilot,	1
Drover,	1
Soldier,	1
Turner,	1
House work,	1,167
School girls,	52
Tailoresses,	35
Instructresses,	32
Milliners,	28
Mantua makers,	21
Factory girls,	10
Seamstresses,	2
Music teachers,	2
Total,	<u>2,743</u>

This table exhibits a large number of farmers. As a matter of course this could not be otherwise, from the situation of the institution in a rural district, surrounded on all sides by a farming population, but still the ratio of insane farmers to the entire farming population, shows that farming is the most healthful of all occupations.

Of the mechanical trades, carpenters and shoemakers contribute the largest number of patients—the one from exposure to accidents, the other from sedentary pursuits. To judge with accuracy which of all the occupations is the most healthful, the ratio between the number following any given business and the whole population, must be considered.

The civil condition of patients hitherto admitted is as follows :

Married,	1,304
Single,	1,275
Widows,	113
Widowers,	51
Total,	<u>2,743</u>

Nativity.

New-York,	1,932
Ireland,	191
Connecticut,	118
Massachusetts,	94
England,	91
Vermont,	54
Germany,	39
New Hampshire,	32
Scotland,	31
Canada,	27
Rhode Island,	23
Pennsylvania,	21
New Jersey,	19
Wales,	19
Maine,	11
France,	9
Ohio,	5

Maryland,	4
South Carolina,	3
Virginia,	3
Sandwich Islands,	3
Denmark,	2
West Indies,	2
Florida,	2
Michigan,	2
North Carolina,	1
Africa,	1
Switzerland,	1
Indiana,	1
Mississippi,	1
Russia,	1
Total,	<u>2,743</u>

It will be perceived that the institution receives a large number born in foreign lands, very many of whom however, have been citizens of the State for years. The whole number is four hundred and nineteen. During the past year we have had several in the house who could not speak the English language, mostly Germans, one Swiss and one Sandwich Islander. One Frenchman refuses to speak English, but we doubt his inability to do so.

Probable causes of derangement in 2,743 cases.

	Admitted previously to Dec. 30, 1849.			Admitted during the year.		
	Males	Fem.	Total	Males	Fem.	Total
Ill health,	174	274	448			
Religious anxiety,	103	102	205			
Loss of property,	67	26	93	4		4
Puerperal,		93	93		22	22
Sickness and death of kindred, . . .	26	61	87			
Intemperance,	82	5	87	21	2	23
Business excitement,	51	14	65	7		7
Disappointment in love,	36	24	60	3	2	5
Excessive study,	52	7	59	1		1
Excessive labor,	21	23	44	7	1	8
Epilepsy,	30	12	42	7	1	8

	Admitted previously to Dec. 30, 1849.			Admitted during the year.		
	Males.	Fem.	Total	Males	Fem.	Total
Millerism,.....	17	21	38	4	1	5
Domestic trouble,	8	22	30		12	12
Abuse of husband,.....		34	34			
Injury of the head,	24	5	29	3		3
Fright,.....	14	13	27		3	3
Dyspepsia and constipation,.....				15	11	26
Masturbation,.....	17	2	19	47	8	55
Fatigue and anxiety,.....					18	18
Suppression of menses,.....					14	14
Menorrhagia at the critical period,					13	13
Strong hereditary predisposition,.				8	6	14
Grief,				2	10	12
Strong predisposition from previous attacks,.....				6	6	12
Imprisonment,	1		1	9	1	10
Jealousy,.....	6	4	10		1	1
Anxiety about absent friends,	4	15	19			
Disappointed ambition,	6	4	10			
Illness of friends,	1	7	8			
Exposure to excessive heat,.....	5	2	7			
Continued fever,				3	4	7
Defective training,.....				4	3	7
Political excitement,.....	6		6			
Opium eating,	3	3	6		1	1
Malformation of the head, (idiots)	3	2	5	1	1	2
Religious excitement,				3	2	5
Infidelity of wife,	4		4			
Excessive pain,	4		4			
Apoplexy,.....				3	1	4
Seduction,		3	3		3	3
Remorse,		3	3			
Bad conduct of children,		3	3			
Going into cold water,	2	1	3			
Old age,	1	2	3			
Want and destitution,		2	2	1	2	3
Measles,		3	3			
Use of snuff,		3	3			
Anticipations of wealth,	1	2	3			

	Admitted previously to Dec. 30, 1849.			Admitted during the year.		
	Males	Fem.	Total	Males	Fem.	Total
Loss of sleep,	4	3	7	1	1	2
Quack medicines,				2	1	3
Excessive venery,				2	1	3
Want of occupation,		2	2			
Excitement of sea voyage,		2	2			
False accusation,		2	2			
Ill treatment of parents,	1	1	2			
Violent temper,	2		2			
Scarlet fever,	2		2			
Difficulty with neighbors,	1	1	2			
Excitement of lawsuit,	1	1	2			
Neuralgia,	2		2			
Disappointed hopes,				2		2
Perfectionism,				1	1	2
Phthisis pulmonalis,				2		2
Infidelity of husband,		1	1			
License question,		1	1			
Fourierism,	1		1			
Sedentary life,	1		1			
Nostalgia,					2	2
Preaching 16 days and nights,	1		1			
Celibacy,					1	1
Deafness,					1	1
Mesmerism,					1	1
Non-appearance of menses,					1	1
Hydrocephalus,				1		1
Coup de soleil,				1		1
Excitement of visiting,		1	1			
Firing of cannon,		1	1			
Excessive smoking,		1	1			
Severe whipping,	1		1			
Anti-rent excitement,	1		1			
Rehabitism,	1		1			
Mormonism,	1		1			
Exposure to fumes of charcoal,		1	1			
Inhaling carbonic acid gas,	1		1			
Murder of son,		1	1			
Seclusion from society,		1	1			

	Admitted previously to Dec. 30, 1849.			Admitted during the year.		
	Males	Fem.	Total	Males	Fem.	Total
Burn of head,	1		1			
Study of phrenology,	1		1			
Unknown,	417	350	767	13	24	37
Grand total,.....	1,209	1,167	2,376	184	183	367

We have placed the cases admitted during the past year in separate columns, continuing, however, as will be perceived, the publication of the table of previous years, under the same headings as heretofore. We make this distinction with the view of hereafter condensing our tables as much as possible, and reporting the causes as they are developed from the history and progress of the diseases, rather than those received as the supposed causes from friends.

The causes to which insanity is attributed by friends, are generally very unsatisfactory. By obtaining a careful history of the individual, when this can be had, a tolerably correct opinion can be formed; still our suppositions must often be vague, and we are obliged to enter thirty-seven of those admitted the past year as "unknown."

Most of them were brought by persons who knew little or nothing about them, and of whom as yet we have been unable to obtain any reliable information. (In one case of a German girl, the name even of the patient is "unknown.") Frequently the patient himself can give the most satisfactory cause of his insanity, and often the very opposite of that attributed by his friends.

This is especially true of masturbators, whose insanity is looked upon by friends as caused by "religious anxiety," because the first evidence of insanity noticed was an extraordinary anxiety about their salvation, an inordinate fear of future punishment, or abandoning all occupation but that of reading, or holding a bible as if reading, or praying, or mumbling over incoherent sentences in an attitude of prayer at improper times and places, or trying to "tell his experience" in a religious meeting, or joining in and going to great lengths in the excitement of protracted religious meetings, or in such like acts, the person is supposed to be made insane by "religious anxiety."

By carefully watching the habits of these patients and by their own confessions, they are almost invariably found to be, and for years have been, masturbators; by which habit, long continued, they had gradually undermined their constitution, become timid, shy, nervous, unhappy, feeling remorse at their vice, but yet unable to overcome it, and finally presenting all the phenomena of "religious anxiety."

Another class frequently placed under the head of religious anxiety are religious monomaniacs, whose insanity is undoubtedly referrible to dyspepsia, habitual indigestion and constipation, and the injudicious use of remedies for these diseases.

Again, from religious excitement, individuals having a hereditary or other predisposition to insanity, with feeble constitutions, become insane from the fatigue and exposure, loss of sleep and irregular diet while in attendance on a protracted religious meeting. We report five under this head.

Masturbation as a very fruitful cause of insanity, deserves especial attention. Fifty-five cases admitted during the past year we attributed to this cause, and we believe this to be less than the actual number. Many of these cases had been addicted to this horrid vice from youth and even childhood, by which their mental and physical strength was insidiously debilitated, and insanity slowly induced.

In addition to those fifty-five whose insanity is attributed to this cause five others admitted during the year, insane from other causes, and forty-seven of those remaining in the institution at the close of last year were addicted to this vice, making one hundred and seven masturbators out of eight hundred and sixteen cases ! The practice is often freely confessed and vigorously resisted. One patient in his zeal to conquer this habit subjected himself to severe torture. Another performed upon himself a painful surgical operation. In the male sex the habit is not difficult of detection. In the female it is more successfully concealed. The shy, timid, downcast countenance, combined with a debilitated physique, with relaxed tissues and varicose veins arouses our suspicions. In some females the effect is the development of the cellular and adipose tissues and gay voluptuous manners, and in others debility and emaciation. Its existence in the female sex appears from the table to be unfrequent when compared with the male, and we doubt not it is so, though we occasionally place a

female under treatment for the disease, when there is no evidence that it is demanded except the general appearance of the patient. We rely mainly on mechanical restraint and aphrodisiac medicines. The combination we prefer is that of conium, camphor and belladonna, and we think we have indubitable evidence of its power. We sometimes prescribe blisters and cold baths with advantage. We have not sufficient experience of cauterizing the urethra to speak of its effects.

Twenty-two puerperal cases were admitted during the year. Fifteen remained in the asylum at the close of last year. The exciting causes in these cases, whether physical or moral, have not been obtained with sufficient accuracy to make them a matter of record. Of these thirty-seven cases one became insane one week previous to confinement, six immediately after confinement, one on the third day, one the fifth, one a week, six two weeks, two three weeks, two four weeks, two eight weeks, two twelve weeks, two fourteen weeks, and one sixteen weeks after confinement. In nine the data of attack was unknown. Insanity coming on soon after delivery is in many instances, undoubtedly owing to the too early return of the female to her accustomed duties. From ignorance or necessity, too frequently the former, a mother weakened by the loss of blood, and her nerves shattered by the agonies of childbirth, is allowed in three or four days to rise from her bed, take care of her infant, and, it may be, assist in the domestic duties of the family. She feels strong, and therefore thinks it safe to exert her strength, or rather thinks nothing about it. She was never told, nor had she imagined, that her physical frame required repose for a month or more, to adapt itself to its new circumstances, and that the loss of health and of reason were in numerous instances the penalties for refusing this indulgence. If to these dangers be added a pressure of domestic troubles, a sick infant, a negligent, improvident, intemperate, unkind or cruel husband, it would require superhuman strength of mind and body to bear up under the accumulated load.

Another cause of insanity is *fatigue and anxiety in rearing a family*. We place these causes under a distinct head for the purpose of calling to them special attention. These eighteen are females whose married life, for the most part, commenced with little means. Possessing in common with their husbands a laudable ambition to pro-

vide a comfortable home for a rapidly increasing family, they task themselves beyond what the female frame by nature is intended to endure.

These cases with those produced by dyspepsia and constipation, menorrhagia at change of life, deranged menstruation, fever, &c., might be entered under the head of "ill health." But we prefer a more definite course, for the purpose of placing distinctly in view the connection of these diseases with insanity.

Under the head of "imprisonment," we have ten cases. These are all, save two, cases of "feigned insanity," and therefore have no bearing on the subject of social or solitary confinement as a cause of mental disease. Of the two, one became insane before trial and was doubtless made insane by fear of conviction, and the other perhaps by masturbation. Besides these ten, there have been sent to us, from prisons and jails, several others who were cases of genuine insanity, but who were doubtless insane when committed. Their insanity is therefore referred to causes acting upon them prior to imprisonment.

We have recorded "defective training" as the sole cause of insanity in seven cases. That it is the remote cause in hundreds, we have no doubt. Parents and guardians cannot be too strongly impressed with their responsibility in this matter, especially in those families, in which, near or remote, insanity may have occurred, and so rear their offspring as to guard them against this appalling calamity.

We have placed "indisposition from previous attacks," and "hereditary indisposition," in the list of causes. In the cases arranged under these heads, the excitability of the nervous system was so great as to be thrown off its balance by slight disturbing causes, so slight and gradual in their operations as to render it impossible to fix upon any particular incident as to the cause of attack. Out of eight hundred and sixteen cases, one hundred and eighty-seven were known to have had insane relations, and from the known reluctance of friends to make this public, there can be no doubt that the actual number is much greater. The predisposition was,

Paternal in 41 males, 33 females ; total,	74
Maternal in 32 males, 51 females ; total,	93
Paternal and maternal in 11 males, 9 females ; total,	20

Of the eight hundred and sixteen patients in the institution during the past year, the suicidal propensity existed in sixty-six ; twenty-two males and forty-four females. There were twenty eight ; twenty-one females and seven males, in the house at one time. In twenty of these twenty-one females, the propensity was intense. To have at one time under care, twenty-eight persons, bent upon destroying themselves, is a burden which they alone know who bear it, increased by the necessity of carrying at all times, amid surrounding sadness, a cheerful countenance over a heavy heart. The successful attempt at self-destruction, before reported, was made on the 12th of July, by a female patient of our most intelligent class. Her melancholy end became known to her companions, with whom she was a favorite, and on the following day two other patients on the same wall, were overheard devising a plan for their own death. About this time the suicidal propensity prevailed extensively, and seemed to be epidemic. There were admitted during the month of July the large number of forty-four patients, from different portions of the State, nineteen of whom were suicidal. Several of these had attempted suicide immediately previous to admission. One by suspension, which was discovered before life was entirely extinct, to whom animation was with difficulty restored. Another by cutting her throat in a most shocking manner, and others by poison. Two patients who had been long in the house, and never exhibited suicidal propensities, attempted it during this month, though they had no knowledge of the violent death that had occurred in another portion of the building. On the thirteenth of this month, ignorant of the occurrences of the previous day, they attempted strangulation, and so persevering were they in subsequent attempts, that they could only be preserved by mechanical restraint. On the same day a female attendant took an ounce of tincture of opium "because she liked it," without, however, any apparent intention of self-destruction. She had been an active and faithful person, and still continues in the service of the institution, useful and trusted.

On the 17th, a patient believed to be entirely ignorant of all that had occurred previously, attempted strangulation, and continued to repeat the attempt, until restrained by mechanical means. On the 20th, a patient tried to open a vein in her neck, and on the 22d another, who knew of the suicide, and was no doubt influenced by it, attempted her destruction.

From the 14th of July, fourteen attempts were made by eight different persons, and twelve others in whom the propensity was strong, required constant observation.

The suicidal epidemic prevailed from the 12th to the end of July, after which time it gradually subsided, and left the minds of most of the patients. No suicidal attempt was made in August in any portion of the house. The above dates and particulars are taken from the day book, in which the daily occurrences of the house are recorded. They were accurately noted by Dr. Cook, senior assistant physician, to whose care and attention the safety and comfort of the female patients during this trying time was mainly due, and who for his zeal and faithfulness, in the performance of his duties generally, and for gentleness, delicacy and prudence, merits the highest praise. Few of our patients have special attendants, the prices fixed for board not contemplating such a necessity. None of those referred to above, were so attended. Hence much additional labor and loss of sleep, were imposed upon our attendants at this time, and they deserve our thanks for their readiness and faithfulness. By putting these patients to sleep in associated dormitories, they to some extent protect each other. One suicidal patient will watch and report an attempt at self-destruction by another. Our confidence in associated dormitories so arranged that the attendant commands, while in bed, all parts of the dormitory, is rather increased than diminished by the past year's experience, and we contemplate some alteration in this respect which will add to the safety of the patients. But little reliance we think can be placed on the promises of patients to resist this temptation : The mechanical restraint used in these cases, was the ordinary muff, mittens, wristbands, or waist, either of which is worn at night without much abridgment of comfort. The medicines used in these cases were adapted to the varying condition of the physical health ; and generally, laxatives, morphia, and warm baths were demanded.

We have had during the year ten homicidal cases, nine men and one woman : a part admitted during the year, a part previously. Of the latter, two are intensely homicidal. These two have been insane for many years; and the propensity seems to increase in activity with the duration of their disease. One, a very athletic man, shows a desire to kill by strangulation. He has often been seen, without any provocation, to seize another by the throat and arrest respiration, at

the same time smiling with satanic pleasure. The other desires to kill with a cutting instrument, and is rendered perfectly rabid by the sight of a knife. These, though dangerous when at large, are in our judgment rendered more fierce and severe by seclusion. We therefore give these, in common with all others, much liberty.

We occasionally confine a patient to his room for half a day, a day or two days, but rarely for three days. Paroxysmal cases and some of uncontrollable temper are occasionally thus confined. We believe the average seclusion for the year has not exceeded one per cent. In about the same ratio mechanical restraint is worn by the violent and dangerous. We frequently pass weeks without any man wearing restraint, but we have to resort to these means more frequently among females, owing to the greater difficulty with which they are prevented from destroying their clothing. Male attendants have also more complete control over male patients, than female attendants have over female patients. Neither this fact however, nor any other, could induce us to employ male attendants for female patients. I would sooner have mittens on every woman in the house than employ male attendants for any portion of the females. It is the violent class of all others, those who destroy their clothing and strip naked their persons, who are to be protected from the eyes and hands of the other sex. Good female attendants, with sound judgment, strong arm, and courageous hearts, tempered with kindness and sympathy, are in no more danger from violent female patients, than male attendants are from a similar class of males.* Both situations are trying and arduous, and to those who have through the year borne the responsibility and carried out our plans, we do feel obliged, and cordially acknowledge our appreciation of their services. The duties of faithful attendance in any capacity, are self-denying and ceaseless, and no situation is more deserving of profitable and honorable recompense.

As the violent patients, out of two hundred and twenty of each sex make a very bad class, as bad as could be made by taking three or four of the very worst, from three or four small institutions, still

* The locks on the doors of the female department are unlike those on the doors of the male department; and no man, except the superintendent and senior assistant physician, is allowed to carry a key to the female apartments. A key is kept in the office for the use of the other officers, who may be sent into this wing on special business, through the day, and this key is removed at night. No male assistant whatever is needed in the management of this department.

we are willing to compare our most excited family, in comfort, cleanliness, order and liberty, with a similar class any where. We have no "straw rooms," no sleeping room without a comfortable bed and bedding, and no matter how destructive a patient may be, these are renewed each night, the room being unoccupied through the day. Every female patient has a bedstead in her room. In the mens' wing, a single room only without furniture, in each excited hall, is needed for temporary seclusion.

Our household is divided into ten distinct families of each sex, living as distinct from each other as families in adjoining houses in a city, each having their separate domestic accommodations, dining rooms, sitting, reading and sewing rooms, verandahs for exercise, bath rooms and water closets.

The food and cooking, bedding and attendance, is the same in all parts of the house. The furniture of each hall is adapted to the state of mind and habits of those occupying it. Our bill of fare is very complete, wholesome, nutritious, palatable and abundant. Our most improved classes will compare in intelligence and good manners, in the style and furniture of their tables and apartments, with the company and accommodations of the generality of our hotels. These classes number in all about seventy-five, containing the convalescent and recovered patients, and those so slightly disturbed in their mental equilibrium, as not to interfere with the comforts of each other.

We have ample facilities for pleasure, amusement and exercise within doors, though many of this class are allowed to walk out at pleasure unattended. We are governed in our selections for this liberty by character, habits, temptations and impulses of each individual. From the best to the worst class, the gradation is gradual and almost imperceptible. The first five are very pleasant, quiet and agreeable; the remaining five descend gradually from the dull to the stupid, demented and filthy, noisy and violent. They are so arranged that the first classes see nothing and hear little of the others. When patients are first received, they are placed with a family, which, according to the account given by their friends, they seem best suited for, and they are subsequently removed to a better or worse as their varying mental condition may render necessary. It is from the most violent and excited class, that the most cures are effected, and it is

not uncommon for a patient of this class to pass through all the intermediate families, until discharged from the most pleasant. Others experience more sudden changes, and are more rapid in their transition. When a patient becomes noisy or turbulent in a quiet class, he is removed to one less rational, or confined to his room a part of the day. This is the discipline upon which we depend. The application of cold water to suppress insubordination, is never allowed. An attendant would be instantly discharged for such an act, and when an attendant is discharged from the institution for a violation of its rules, according to their agreement, they forfeit one month's wages. Whilst we require kindness and persuasion in the management of patients, we encourage firmness and decision.

We study to occupy our patients, and there is no class in the building that does not daily furnish workers for out door or indoor employment. Many patients assist with pleasure and skill in the work of the halls, and dining rooms and ironing rooms. The whittling shop furnishes employment and amusement for the otherwise idle hours of many. We have almost every branch of mechanics, represented by a foreman of each, under whose care many male patients are constantly occupied. A painter, printer, plumber, glazier, gasfitter, carpenter, joiner, mason, blacksmith, and fireman and tailor, each with his respective shop, in which many of the insane find profitable as well as pleasant employment. We have also a shoe shop, which has recently been conducted successfully by a convalescent patient. The wood yard also furnishes much employment for many in the winter. In summer our farm and grounds will always afford ample occupation for all desiring it. A large number of patients are constantly engaged during the spring and summer in our large vegetable garden and farm, especially in haying, when fifty men may be seen in the hayfield at one time.

The steward estimates the products of the farm for the past year as follows :

Hay,	80 tons.
Potatoes,	600 bushels.
Corn,	150 "
Beans,	25 "
Peas,	80 "
Beets,	300 "

Carrots,	400 bushels.
Parsnips,	200 "
Melons,	800
Turnips,	150 bushels.
Onions,	200 "
Currants,	20 "
Strawberries,	6 "
Gooseberries,	6 "
Salsify,	40 "
Tomatoes,	200 "
Squashes,	800
Pumpkins,	300
Cabbage,	7000 heads.
Celery,	2000 "
Cucumbers,	12 barrels.
Pork,	9500 pounds.
Hogs,	34
Horses,	7
Cows,	21

The potato crop was a failure. The planting was done with a view of raising 2000 bushels, but the rot cut short these hopes.

The females find occupation mainly in sewing, useful and fancy work. Even the most stupid and demented can be taught to make themselves useful in this way, and the excited are much more easily controlled when thus employed. It is common to see the entire company of some of our worst halls, sitting quietly at their sewing.

It appears that 5,252 articles of clothing and bedding were made during the year, as follows :

Shirts,	283
Wrappers,	121
Pillow cases,	844
Hose,	130 pairs.
Socks,	244 "
Sheets,	93
Table cloths,	93
Dresses,	365
Dress caps,	133

Night caps,	8
Night dresses,	100
Chemises,	347
Cravats,	584
Pocket handkerchiefs,	245
Towels,	553
Bed ticks,	111
Bolster ticks,	68
Curtains,	128
Mattress ticks,	69
Bed spreads,	128
Other articles,	88
Total,	<u>5,252</u>

Much fancy work is done here. Painting, worsted work, knitting of all kinds, flower making, &c., are carried on with much skill, and almost every conceivable article made with needle and scissors, is the product of our ladies' ingenuity. At a fair held in the asylum last November, these articles were displayed with a taste, and the hall of exhibition decorated in a style that would have done credit to any community.

Reading is a favorite occupation with many, and a few, both males and females, spend much time in writing for publication, of whose lucubrations, "The Opal," a newspaper recently established in the asylum, is entirely composed.

The printing of this paper and the Journal of Insanity, which is still published at the Asylum, furnishes constant business for our printing office. In exchange for these publications we receive a large amount of reading matter, which is eagerly sought for by the patients. Should any profits accrue from these publications they will be appropriated to enlarging and renewing our library. We desire to return our sincere thanks for ourselves and our patients to the publishers and editors of the following "exchanges," which have come to us during the past year, most of them regularly :

Hudson Ohio Observer.

Morrisville Observer.

New-York Bible Society Record.

New-York Sabbath Recorder.
Boston Transcript.
Granville Telegraph.
Washington County Post.
New-York Organ.
Family Journal, Troy.
Detroit Weekly Advertiser.
Janesville Gazette.
Saturday Gazette, Philadelphia.
Weekly Evening Post, New-York.
Elmira Gazette.
Boston American Union.
Greenfield American Republican.
Batavia Republican Advocate.
Skaneateles Democrat.
Utica American Baptist.
Fishkill Standard.
Sullivan County Whig.
Ontario Messenger.
Ontario Repository.
New-York Churchman.
New-York Protestant Churchman.
New-York Evangelist and Presbyterian.
New-York Christian Messenger.
New-York Young America.
New-York Freeman's Journal.
New-York Literary World.
New-York Christian Inquirer.
New-York Christian Intelligencer.
Jefferson County Democrat.
New-York Daily Sun.
Utica Daily Gazette.
Utica Herald.
Utica Democrat.
Gospel Messenger.
Utica Teetotaller.
New-York Baptist Register.
Albany Atlas.
Albany Dutchman.

Sag Harbor Corrector.
Cooperstown Freeman's Journal.
Troy Whig.
Auburn Christian Advocate.
Sandy Hill Herald.
Long Island Farmer.
Jamaica Democrat.
Syracuse Standard.
Syracuse Religious Recorder.
Delhi Express.
Wayne County Whig.
Poughkeepsie Journal and Eagle.
Watertown Jeffersonian.
Watertown Journal.
Watertown Reformer.
Geneva Gazette.
Cortland County Whig.
Rome Sentinel.
Roman Citizen.
Glens Falls Republican.
Lynn News.
Boston Olive Branch.
Boston Cataract.
Boston Christian Register.
Hartford Times.
Hartford Christian Secretary.
Portland Christian Mirror.
Pittsfield Eagle.
Friends Review.
Auburn Cayuga Chief.
Washington Republic.
Boston Railway Times.

We also receive a large number of medical exchanges. To the Hon. Chas. A. Mann, Hon. O. B. Mattison, Hon. Wm. H. Seward, and Miss D. L. Dix, we are under obligation for public documents, and to the latter for presents of interest and value.

We have made several feeble attempts to make schools useful during the past year, but have had nothing in operation worthy the
[Senate, No. 42.]

name. We have had for part of the time one person employed, of either sex, exclusively for this duty, besides having several patients well qualified to teach. One youth recently showed remarkable tact and skill in drilling—(while he himself was much excited,)—a class of irritable and demented incurables, with whom he, for a time, resided, and with benefit to himself and them. We have now in operation a singing school, mostly of attendants, which promises to make for our chapel a creditable choir.

The amusements of the house are continued as heretofore. A pair of horses, a carriage and sleigh are appropriated for the use of female patients, and are in almost constant use. The entire female population ride in rotation, and if no interruption occurs, the whole can be carried out once a week. In summer, females walk out in parties frequently, generally confining themselves to our grounds.

The male patients take long walks in large parties almost daily. A few go out unattended. It occasionally happens that a patient escapes while out, still we prefer to give all a large amount of liberty and run the risk, for the general good, and even the individual himself is sometimes benefited by his effort in eluding pursuit, and reaches home nearly or quite well. Games of all kinds—except cards, which are gradually being abolished—are freely permitted. Music and dancing are favorite amusements with many, particularly females. Tableaux and exhibitions are occasionally prepared. Some of these have been witnessed by our friends of Utica. We insert a copy of the printed bill of one of these performances, which afforded much amusement to all who were present.

INSANATORY ENTERTAINMENT.

FIRST NIGHT OF THE SEASON! GREAT ATTRACTION!!

Bill for Thursday evening, Nov. 7, 1850.

Voluntary upon flutes,..... J. H. and G. P.

The Prologue.

THE GRIDIRON, A DIALOGUE.

Captain,..... J. S.

Patrick,..... W. P.

Frenchman,..... G. V. H.

Music by the Band.

A DIALOGUE BETWEEN A LANDLORD AND FARMER.

Landlord,..... H. S. H.

Farmer,..... B. H. W.

Song,—“The sky is bright,”—G. P., P. G., W. P. and J. H.

TABLEAU VIVANS.

Uncle Toby,..... D. R.

Widow Wadman,..... G. V. H.

Music by the band.

Recitation. The Hermit,..... A. G. S. M.

Music upon flutes. After which the laughable song called

“THE OBEDIENT PUPILS.”

Schoolmaster,..... J. C.

Scholars,..... W. P., J. S., H. F. R.

Recitation. The virtues of tea,..... P. M.

To be followed by a most laughable burlesque entitled

THE LETTER.

Squire Egan,..... H. S. H.

Andy,..... W. P.

Air upon flutes,—J. H., G. P.

A dialogue.

TEACHING MANNERS.

Dr. Wisepate,..... H. S. H.

Pat O'Keen,..... L. R. H.

Robert,..... G. V. H.

Bugle troop upon the flute,..... J. H.

The whole to conclude with the

ETHIOPIAN EXTRAVAGANZAS.

Sambo,..... J. S.

Ned,..... B. H. W.

Jim,..... W. P.

Gumbo,..... J. C.

Cato,..... H. F. R.

Bones,..... W. H.

Quambo,..... S. M. M.

The performances to commence at 7 o'clock precisely. No postponement on account of the weather.

Five thousand dollars were appropriated by the last Legislature for the purchase of furniture, two thousand five hundred of which was payable during the year. It will be observed by the Treasurer's re-

port that over six thousand dollars were expended, and about as much more must be expended to complete the furnishing of the building.

The expenses for alterations and repairs amounted to \$4,039, and we have as yet scarcely made a beginning. 300 feet of a brick circular sewer, ovoid shape, laid in water lime three feet deep by two feet wide were put down during the summer. More of this kind of sewer is now needed.

The entire arrangement of baths, sink rooms and water closets needs reconstructing. Should this be done with iron piping and improved fixtures, the expense will be very considerable. Should the present arrangement for obtaining water from the Chenango canal, which has frequently failed during the past year be continued, the cisterns which have become very troublesome on account of leakage should be replaced by iron tanks. The awful calamity to a similar institution in a sister state, warns us to be amply supplied with water, and the means for extinguishing fire. With our present resources a fire underway could not be extinguished ; and when it is borne in mind that we have over thirty fires in operation, burning, in cold weather, at the rate of twenty cords of wood per day, with a mode of heating especially liable to danger from fire, the necessity of being completely guarded in this respect will be manifest. To obtain all that is desirable, an entire change in the mode of heating will be necessary as well as an ample supply of water. By connecting with the Utica water works, an abundant supply of pure and wholesome water can be obtained.

The improvements yearly made in the construction and fixtures of lunatic hospitals, leave us in some respects in the back ground, especially in our mode of heating and want of forced ventilation. The possibility of remodelling a building already erected, and adapting it for these improvements, is demonstrated elsewhere. Our own State furnishes at least one example. I allude to the City Hospital, New-York, which has been so altered and improved, with the most satisfactory results.

We adopt the motto of our noble State, and our efforts to excel are limited only by our resources. The income of the institution is so adjusted as barely to meet its expenses, and is entirely inadequate to cover the estimate for the repairs at this moment imperiously de-

manded. Of course no important alteration can be made without legislative aid.

The salutary influence on the insane mind of highly cultivated lawns—pleasant walks amid shade trees, shrubbery, and fountains, beguiling the long hours of their tedious confinement—giving pleasure, content, and health, by their beauty and variety, are fully appreciated by us.

To make our grounds, what every friend of the insane and of the institution must desire, many years will be required. Prompt action is therefore demanded. Necessity alone compels delay until other more imperative calls are answered. The improved cultivation of the farm, by underdraining, levelling, and extirpation of thistles and daisies, we cannot postpone. We are indebted to John Williams, Esq., of Aurora, for a present of fruit and ornamental trees, and for the interest he has shown in the improvement and adorning of our grounds.

In conclusion, gentlemen, permit me to express my high appreciation of the friendly regard you have shown me, and my thanks for your uniform kindness and support during the first year of our intercourse, and for your co-operation in all that has been undertaken. Especially do I thank you for your readiness to make the Asylum a comfortable dwelling for myself and family.

Dr. Cook, who was acting superintendent from the death of the lamented Dr. Brigham to the commencement of the past year, continues his connection with the Asylum as first assistant physician. He has cordially co-operated with me, and faithfully carried out my plans and suggestions, with wisdom, fidelity, and efficiency. I should be sorry to part with him.

Dr. Porter, the second assistant physician for several years past, has also continued to perform his duties with unremitting assiduity.

Dr. Gray was appointed third assistant physician in September. His character and preparation for his duties were before known to me, and he enters upon them with a zeal and devotion that warrant the highest expectations.

Mr. and Mrs. Robert J. Morris, whose resignation was reluctantly accepted by the board, left the institution regretted by many of our household, to whom they had endeared themselves by many kind offices.

Mr. Mortimer Rhoades, appointed to fill the office of steward in November, has not as yet had sufficient time to familiarize himself with the varied, arduous, and responsible duties of his office.

In securing the services of Mrs. Ann W. Smith for matron, we conceive the institution extremely fortunate. Few persons can be found combining so many of the qualities necessary for an efficient and thorough performance of her multiform duties. Much of the comfort as well as economy of the whole house depends on the competent discharge of the duties of this office; and we have the fullest confidence of her ability and entire interest in the work she has assumed.

The Rev. Chauncey E. Goodrich still fills the office of chaplain, regularly and faithfully. Many patients are benefited by the chapel services; and their controlling themselves for an hour is an exercise which might be performed oftener than once a week with advantage. About fifty of our family attend morning service in the various churches of the city of Utica, when the walking will admit of it, our chapel being open only in the afternoon.

There has been in the employ of the institution an average of about one hundred persons. Of this number, about one-half live in the halls with the patients. Thirty are attendants, who devote all their time to the comfort of the patients, to their amusements and employment in the house, and to the care of their clothing, persons, and rooms. Twenty work in dining rooms, as their principal duty, and assist in the care of patients when not thus engaged. We have had at no time during the year more than two special attendants. Of the fifty not employed in the care of patients, fifteen work at cooking, ten at washing and ironing, five in the care of the farm, garden, and stock, and as carriage drivers, six mechanics, a watchman and watchwoman and fireman, three chambermaids, and two table waiters, employed in the centre building, and six subordinate officers.

To all who have been instrumental in any way in contributing to the care or comfort of our large family, we return our thanks. Many,

especially attendants, for their faithfulness and devotion merit much praise, whose valuable services we should regret to lose.

Trusting that the continued efforts of all connected with the institution may result not only in preserving its previous reputation, but also yearly merit higher confidence, and attain to a higher degree of excellence and adaptation to the object for which it was organized; thankful to a merciful Providence for unnumbered benefits; and imploring His protection and blessing for the year on which we are just entering, this report is respectfully submitted.

N. D. BENEDICT.

New-York State Lunatic Asylum,
November 30, 1850.

APPENDIX.

For the information of those who may desire to place their friends in this institution, we add the law regulating the admission of patients :

“ Each county may at all times have one indigent insane patient in the Asylum, whose disease at the time of admission was a first attack, and did not exceed six months ; and such further number of either old or recent cases as the Asylum can accommodate, in proportion to the insane population of the county. The patients shall be designated by the superintendents of the poor, or, if the county has no such superintendents, by the first judge.” (Chap. 135, Session Laws, 1842, sec. 25.)

“ The county superintendents of the poor of any county, and any overseers of the poor of any town, to which any person shall be chargeable, who shall be or become a lunatic, may send such person to the Lunatic Asylum by an order under their hands.”

Under this law an order of the superintendent of the poor for the county, or of the overseers of the poor of the town to which the patient is chargeable, and which pays the expense without recourse to the county, is all that is necessary for the admission of any poor person. Where the order is made by the overseers of the poor of a town, it should be stated that the town alone is liable for the support of the patient, and not the county.

The order of a county judge secures the admission of *indigent* persons, not *paupers*, in which order it must be stated that the applicant became insane within one year prior to the date of the order. Sec. 26, of act of 1842, is as follows :

“ When a person in indigent circumstances, not a pauper, becomes insane, application may be made in his behalf to the first judge of the county where he resides ; and said judge shall call two respectable

physicians and other credible witnesses, and fully investigate the facts of the case, and either with or without the verdict of a jury, at his discretion, as to the question of insanity, shall decide the case as to his indigence. And if the judge certifies that satisfactory proof has been adduced showing him insane, and his estate is insufficient to support him and his family, (or if he has no family, himself,) under the visitation of insanity, on his certificate, authenticated by the county clerk and seal of the county courts, he shall be admitted into the Asylum and supported there at the expense of said county, until he shall be restored to soundness of mind, if effected in two years. The judge, in such case, shall have requisite power to compel the attendance of witnesses and jurors, and shall file the certificate of the physicians, taken under oath, and other papers, with a report of his proceedings and decision, with the clerk of the county, and report the facts to the supervisors, whose duty it shall be, at their next annual meeting, to raise the money requisite to meet the expenses of support accordingly."

The above law was changed by chap. 282, Session Laws, 1850, sec. 2, of which is as follows :

"No person in indigent circumstances, not a pauper, shall be admitted into the Asylum on the certificate of a county judge, made under and pursuant to the provisions of the twenty-sixth section of the "*Act to organize the State Lunatic Asylum, and more effectually to provide for the cure, maintenance and recovery of the insane,*" passed April 7th, 1842, unless such person has become insane within one year next prior to the granting of such certificate by the county judge, and it shall be the duty of said judge when an application is made to him, pursuant to said twenty-sixth section of said act, to cause such reasonable notice thereof, and of the time and place of hearing the same, to be given to one of the superintendents of the poor of the county chargeable with supporting such person in the Asylum if admitted, or if such expense is chargeable to a town, or city, then to an overseer of the poor of such town, or city, as he may judge reasonable under the circumstances, and he shall then proceed to enquire as to the time when such person became insane, and shall in addition to the requirements of said twenty-sixth section, state in his certificate that satisfactory proof has been adduced before him, that such person became insane within a year next prior to the date of his certifi-

cate. On granting such certificate the judge may in his discretion require the friends of the patient to give security to the superintendent of the poor of the county, to remove the patient from the Asylum at the end of two years, in case he does not sooner recover. When a patient who is admitted into the Asylum on the certificate of a county judge, given pursuant to the twenty-sixth section of the aforesaid act, has remained in the Asylum two years, and has not recovered, the superintendent of the Asylum shall send notice by mail to the overseer of the poor of the town where the patient resided at the time of his admission into the Asylum, or to the county judge of the county from which he was sent, that such patient has remained two years in the Asylum and has not recovered, and that he should be removed from the Asylum, and that in case he is not removed the expense of his support will be chargeable to the county until he is so removed, and then such expense shall be chargeable to the county accordingly, but in every case where a patient admitted into the Asylum pursuant to the provisions of the twenty-sixth section of said act shall have remained there two years, and has not recovered, the managers of the Asylum may, in their discretion, cause such patient to be returned to the county from which he came, and charge the expense of such removal to the county."

The object of this humane provision is undoubtedly to extend the benefits of this institution to persons with limited means, whose insanity is of a recent date, and therefore probably curable, and if recovered in the space of two years restoring them to their families and property, unimpaired, and saving them from the paralyzing influence upon their future life, of finding themselves by the loss of health and reason, reduced to beggary. Patients sent through this channel generally supply their own clothing, and pay their travelling expenses to and from the Asylum. If not recovered in two years they are then subject to the disposal of the superintendents of the poor of the county from which they are sent and may be by these officers continued here, or removed.

Patients supported by their friends are received without any other papers than certificates from county or bank officers or other prominent individuals, of the ability of those who become bound for their support in the Asylum, to meet all expenses incurred. The form of agreement entered into by the person or sureties who become bound for the patient admitted is as follows :

“Whereas———of the town of———in the county of———an insane person has been admitted as a patient into the N. Y. State Lunatic Asylum at Utica : Now therefore, we the undersigned, in consideration thereof bind ourselves to Edmund A. Wetmore, Treasurer of said Asylum, to pay to him and his successors in office the sum of———dollars———cents per week, for the care and board of said insane person so long as he shall continue in said Asylum, with such extra charges as may be occasioned by his requiring more than ordinary care and attention, and also to provide him with suitable clothing and pay for all such necessary articles of clothing as shall be procured for him by the Steward of the Asylum, and to remove him from the Asylum whenever the room occupied by him shall be required for a class of patients having preference by law, and if he shall be removed at the request of his friends before the expiration of six calendar months after reception, then we engage to pay board for twenty-six weeks, unless he should be sooner cured, and also to pay, not exceeding fifty dollars for all damages he may do to the furniture or other property of said Asylum, and for reasonable charges in case of elopement, and funeral charges in case of death ; such payments for board and clothing to be made semi-annually, on the first day of February and August in each year, and at the time of removal with interest on each bill, from and after the time it becomes due.

In witness whereof we have hereunto set our names this the—— day of——— in the year 1850.”

This agreement or understanding is generally signed by near relatives or other friends of the patient or legal guardians, if any such there be, at or prior to the time of admission or subsequently upon the deposit, on the admission of the patient, of a sum of money sufficient to secure its execution.

The charges for board for this class of patients vary from three to five dollars per week according to the circumstances of the case. Indigent persons who pay their own expenses are received at two dollars and fifty cents per week.

“When an insane person in indigent circumstances shall have been sent to the Asylum by his friends, who have paid his bills therein for six months, if the superintendent shall certify that he is a fit

patient and likely to be benefited by remaining in the institution, the supervisors of the county of his residence, are authorized and required, upon an application under oath in his behalf, to raise a sum of money sufficient to defray the expenses of his remaining there another year, and pay the same to the treasurer of the Asylum. And they shall repeat the same for two succeeding years, upon like application and the production of a new certificate each year, of like import from the superintendent."

As all or nearly all insane persons are "fit" patients for a Lunatic Asylum, and as all such persons are unable to take care of themselves and would be "benefited" by being properly cared for in such an institution, therefore the law doubtless contemplates cases that are likely to result in, or approach at least to recovery, and only in such cases would we feel justified in making the certificate the law demands.

We regret to be obliged to call the attention of county officers to the following law, which is too frequently overlooked or disregarded.

"All town and county officers sending a patient to the Asylum, shall, before sending him, see that he is in a state of perfect bodily cleanliness and is comfortably clothed, and provided with suitable changes of raiment, as prescribed in the by-laws."

We request especially that patients brought to us from county houses be clean and free from vermin.

All patients require at least two suits of clothing and several changes of under-garments. Most of the patients go out regularly and consequently require clothing suited to the seasons. For males, great-coats and boots are required in winter; shoes will answer in the summer; slippers are worn in the house. Females also need ample clothing for riding or walking in the winter. The supply should be liberal when it can be afforded. All clothing is marked with the name of the patient to whom it belongs, and much pains are taken to have it kept in good order and repair.

In conveying a patient to the Asylum, let it be done by force rather than by deception. Truth should not be compromised by planning a journey to Utica or a visit to the Asylum, and when there

suggesting the idea of their staying, while their admission was already decided upon ; nor should patients be induced to come and stay a few days to see how they like it, under the impression that they can leave at pleasure. Such treachery not only destroys confidence in friends, but also too often in us, by the seeming conspiracy to which we are supposed to be a party, than which there can scarcely be a greater barrier to improvement. It is desirable that application for admission be always made before the patient is brought to the Asylum, in reply to which any desired information will be cheerfully furnished. All correspondence about or with patients should be post paid and addressed to the Superintendent of the State Lunatic Asylum, Utica, N. Y.

